

Staple Issue Slip Here

POSITION		ID NO.	DATE
CLASSIFIER		20	10/4
EXAMINER		452	10-9-96
TYPIST		CL	12-21-96
VERIFIER		846	12/23/96
CORPS CORR.			
SPEC. HAND		333	12-9-96
FILE MAINT.		452/800	10-16-96
DRAFTING			

10/16/96

INDEX OF CLAIMS

Claim		Date	
Final	Original		
1	1		
2	2		
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Claim		Date	
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- SYMBOLS
- ✓ ..... Rejected
  - ..... Allowed
  - (Through numeral) Canceled
  - + ..... Restricted
  - N ..... Non-elected
  - I ..... Interference
  - A ..... Appeal
  - O ..... Objected